

**CV-10 1690**

**CIVIL RIGHTS COMPLAINT  
42 U.S.C. § 1983**

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK  
*Martin Donaldson* \_\_\_\_\_ x

**FILED**  
IN CLERK'S OFFICE  
U.S. DISTRICT COURT E.D.N.Y.

★ APR 05 2010 ★

*Martin Donaldson*,  
Full name of plaintiff/prisoner ID#

LONG ISLAND OFFICE

Plaintiff,

JURY TRIAL DEMAND  
YES  NO

-against-

*Wanaus County  
Police Department  
3rd precinct Willington Park N.Y.*

*SEYBERT, J.  
LINDSAY, M.*

Enter full names of defendants

[Make sure those listed above are  
identical to those listed in Part III.]

Defendants.

*Martin Donaldson* \_\_\_\_\_ x

**I. Previous Lawsuits:**

A. Have you begun other lawsuits in state or federal court  
dealing with the same facts involved in this action or  
otherwise relating to your imprisonment? Yes ( ) No (✓)

B. If your answer to A is yes, describe each lawsuit in the space below  
(If there is more than one lawsuit, describe the additional lawsuits  
on another piece of paper, using the same outline.)

1. Parties to this previous lawsuit:

Plaintiffs: \_\_\_\_\_  
\_\_\_\_\_

Defendants: \_\_\_\_\_  
\_\_\_\_\_

2. Court (if federal court, name the district;  
if state court, name the county)

3. Docket Number: 2010 N A 003344

4. Name of the Judge to whom case was assigned: Ronald E. Fischer

5. Disposition: (for example: Was the case dismissed? Was it appealed? Is it still pending?)

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6. Approximate date of filing lawsuit: 3-30-10

7. Approximate date of disposition: \_\_\_\_\_

II. Place of Present Confinement: Nassau County Corrections

A. Is there a prisoner grievance procedure in this institution? Yes ( ) No (  )

B. Did you present the facts relating to your complaint in the prisoner grievance procedure? Yes ( ) No (  )

C. If your answer is YES,

1. What steps did you take? \_\_\_\_\_

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2. What was the result? \_\_\_\_\_

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→ D. If your answer is NO, explain why not It did not  
happen in this jail

E. If there is no prison grievance procedure in the institution, did you complain to prison authorities? Yes ( ) No (  )

F. If your answer is YES,

1. What steps did you take? \_\_\_\_\_

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2. What was the result? \_\_\_\_\_

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III. Parties:

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff Martin Drayakoor

Address 20-F Gladers Ave Hempstead N.Y. 11550

(In item B below, place the full name and address of each defendant)

B. List all defendants' names and the addresses at which each defendant may be served. Plaintiff must provide the address for each defendant named.

Defendant No. 1

Det John Cefalo Shield # 1145  
NASSAU County Police Department  
3<sup>rd</sup> PRECINCT Willingston Park N.Y

Defendant No. 2

Det John Doe  
NASSAU County Police Department  
3<sup>rd</sup> PRECINCT Willingston Park N.Y

Defendant No. 3

Det John Doe  
NASSAU County Police Department  
3<sup>rd</sup> PRECINCT Willingston Park N.Y

Defendant No. 4

Det John Doe  
NASSAU County Police Department  
3<sup>rd</sup> PRECINCT Willingston Park N.Y

Defendant No. 5

Det John Doe  
NASSAU County Police Department  
3<sup>rd</sup> PRECINCT Willingston Park N.Y

[Make sure that the defendants listed above are identical to those listed in the caption on page 1].

IV. Statement of Claim:

(State briefly and concisely, the facts of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need not give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 1/2 by 11 sheets of paper as necessary.)

TWO WARRANTS HAS BEEN ISSUED FOR MY ARREST  
ON 28 OCT 09 AND 4 NOV 09. ON 25-10 AT AROUND  
8:00AM THE NASSAU COUNTY POLICE BOXCED THE CAR  
IN AT THE BACK OF THE GLADYS AVE APARTMENT  
COMPLEX. WHILE I WAS SITTING IN THE DRIVERS  
SIDE SEAT MY WIFE GOT OUT OF THE PASSENGER  
SIDE <sup>SEAT</sup> WHILE AT THAT TIME A NASSAU COUNTY POLICE  
OFFICER ASK MY WIFE FOR HER NAME AND I.D.  
SHE GAVE THE OFFICER HER DRIVERS LICENSE.  
AT THAT TIME THE POLICE OFFICER RAN HER LICENSE  
AND IT CAME BACK CLEAR. THEN THE OFFICER  
PUT HANDCUFFS ON HER AND DAT SEARCHED HER. WAS  
DIGING IN HER ~~WITH~~ <sup>AT</sup> POCKETS WITH <sup>AT</sup> THE PRESENCE OF A FEMALE  
OFFICER ON SITE

IV. A If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical treatment received?

## STATEMENT OF CLAIM

At that time I got out of the car and closed the door only to be approach by Det. John CEFALU. Det. John CEFALU ASK for my NAME AND I told him. At that time Det. John CEFALU, his PARTNER handcuffed me. After handcuffing me John CEFALU, PARTNER & Another officer decide to search the car with out PROBLECAUSE WHERE they found A glass CRACK PIPE RESidue & A GREEN plastic bag with CRACK RESidue which was under the drivers SEAT AND was not in "CLEAR SITE" of the Police officers. Then At that time Det. John CEFALU & his PARTNER SEARCHED ME & found two metal pieces of wire with RESidue in my pockets. I was then put in to the police car and taken to jail charged with 220.3 CRIMINAL POSSESSION OF A CONTROLLED SUBSTANCE IN THE SEVENTH DEGREE A CLASS A MURDEMEANOR

## V. Relief:

State what relief you are seeking if you prevail on your complaint.

Money damages \$ 3,000,000

I declare under penalty of perjury that on 4-2-10, I delivered this  
(Date)  
complaint to prison authorities to be mailed to the United States District Court for the Eastern  
District of New York

Signed this 30 day of March, 2010. I declare under penalty of perjury that the foregoing is true and correct.

X Met Donahue  
Signature of Plaintiff

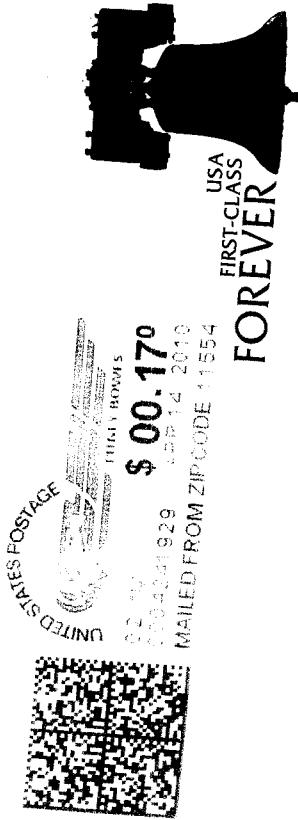
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**Name of Prison Facility**

NASSAU COUNTY CORRECTIONS CENTER  
100 CARMAN AVENUE,  
EAST MEADOW N.Y. 11554  
Address

Prisoner ID# 10001164

Mr. D. A. Jackson  
C. C. # 1000164  
Location E 1G 40  
100 CARMAN AVENUE  
EAST MEADOW, NEW YORK 11554-1146



\* LEGAL MAIL \*

Clerk U.S. District Court, EDNY  
Post Office Box 9014  
Central

CESTRAL Islip, New York 11722-9014 \* LEGAL MAIL \*

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LUDWIG BERNHARD